ploying Office: ploying Office: plate: Date: bar Da	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWEI	If yes, complete and attach Schedule V.	V. (more than \$10,000) during the reporting period? Ves ✓ No □ □	complete and attach Schedule IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Yes V No IX. er	III. more than \$200 in the reporting period or hold any reportable asset worth Yes V No WIII. cu more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes No VII.		Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 Yes 🗸 No 🗀 VI. th	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUES	Report → Annual (May 15) ☐ Amendment ☐ Termination	District: 23	✓ Member of the U.S. House of Representatives	(Full Name)	Lois G. Capps	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT FG
2012 MAY -9 AM 11: 20 (Office Use Only) (S. HOUSE OF REPRESENTATIVES A \$200 penalty shall be assessed against anyone who files more than 30 days late. gift in travel or travel or possible Yes No n \$350 Yes No and the appropriate TIONS Yes No Yes No Od Cs. Yes No Od Od Od Od Od Od Od Od Od O	Yes	N ANSWER EACH OF THESE QUESTIONS	schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate	If yes, complete and attach Schedule IX.	S N		Yes	If yes, complete and attach Schedule VI.	our spouse, or a dependent child receive any reportable gift in ing period (i.e., aggregating more than \$350 and not otherwise Yes No	QUESTIONS	lermination Date: more than 30 days late.		Employing Office:		ļ	FORM A Page 1 of 74 AND DELIVERED

SCHEDULE I - EARNED INCOME

Name Lois G. Capps

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

State Teachers Retirement SystemPension\$19,991University of CA Retirement SystemPension\$47,514Pershing LLCIRA Distribution\$2,122	Source	Туре	Amount
A Retirement System Pension IRA Distribution	State Teachers Retirement System	Pension	\$19,991
IRA Distribution	University of CA Retirement System	Pension	\$47,514
	Pershing LLC	IRA Distribution	\$2,122

> 2	BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCKE
ASS Identify (a) eac value exceedir reportable ass "unearmed" in	Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Year-End Value of Asset At close of reporting year. If you use a valuation method other than fair	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax deferred income	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax- deferred income (such as 401(k) plans or IRAs), you may check the "Non" collection.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in
For all IRAs and (i.e.,plans in whit investments), pro reporting threshoonly the name of reporting period.	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	you may check the "None" column. Dividends, Interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or capacitated	
For rental or o	For rental or other real property held for investment, provide a complete address.			or generated.	
For an ownership ir state the name of the location in Block A.	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.				
Exclude: Your (unless there v \$5,000 or less in, or income o Savings Plan.	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.				
If you so choos spouse (SP) or optional colum	If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.		5 5 5 5 5 5 5		
	Congressiona Federal Credit Union	\$1,001 - \$15,000	None	NONE	
	ING	\$1 - \$1,000	INTEREST	\$1 - \$200	
	IRA - Artio Intl Equity Fund II	\$1,001 - \$15,000	tax deferred	NONE	
	IRA - Capitol World Bond Fund	\$1,001 - \$15,000	tax deferred	NONE	
	IRA - Dodge & Cox Income Fund	\$1,001 - \$15,000	tax deferred	NONE	
	IRA - Fidelity Advisor New Insights	\$1,001 - \$15,000	tax deferred	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME Studio Apartment - Santa Barbara, CA Santa Barbara Bank & Trust **Publishers House of ELCA MET Life** Appreciation Wilder Hill Clean Energy Rabobank IRA - T. Rowe Price Capital IRA - Powershares ETF Trust IRA - Financial Network Money \$1,000,001 -\$5,000,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$1,001 -\$15,000 \$15,001 -\$50,000 \$1 - \$1,000 Indefinite \$1 - \$1,000 Name Lois G. Capps RENT INTEREST INTEREST Royalties DIVIDENDS tax deferred tax deferred tax deferred NONE NONE NONE \$5,001 - \$15,000 \$1 - \$200 \$1 - \$200 \$201 - \$1,000 \$201 - \$1,000 S(part) Page 4 of 7

SCHEDULE IV - TRANSACTIONS

Name Lois G. Capps

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transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

SP,			Capital		
DC,	Asset	Type of Transaction	Gain in Excess of \$2007	Date	Amount of Transaction
	IRA - T. Rowe Price Capital Appreciation	S(part)	No	1-19-2011	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Lois G. Capps

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amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgates on personal residences. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest

	SP, DC, JT
Santa Barbara Bank & Trust	Creditor
February 2012	Date Liability Incurred
Mortgage on home and rental apt. in Santa Barbara	Type of Liability
\$1,000,001 - \$5,000,000	Amount of Liability

SCHEDULE IX - AGREEMENTS

Name Lois G. Capps

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date Parties To Terms of Agreement
1996 Myself and State Teachers Retirement pension for service System